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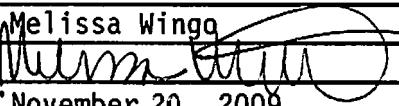
27045 7590 08/20/2009

ERICSSON INC.
6300 LEGACY DRIVE
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| | |
|--|--------------------|
| Melissa Wing | (Depositor's name) |
|  | |
| (Signature) | |
| November 20, 2009 | |
| (Date) | |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/596,777 | 06/23/2006 | Martin de Vries | P16417-US1 | 1362 |

TITLE OF INVENTION: CONTROLLING RECONFIGURATION IN A CELLULAR COMMUNICATION SYSTEM

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE |
|-------------|--------------|---------------|---------------------|----------------------|------------------|----------|
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| nonprovisional | NO | \$1510 | \$300 | \$0 | \$1810 | 11/20/2009 |
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| EXAMINER | ART UNIT | CLASS-SUBCLASS |
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| | | |
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| JAMA, ISAAK R | 2617 | 455-446000 |
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| | |
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| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). | 2. For printing on the patent front page, list |
| <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. | (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, |
| <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev. 03-02 or more recent) attached. Use of a Customer Number is required. | (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. |
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

TELEFONAKTIEBOLAGET L M ERICSSON (PUBL) STOCKHOLM, SWEDEN

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

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 Publication Fee (No small entity discount permitted)
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A check is enclosed.
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5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature



Date November 20, 2009

Typed or printed name

Sidney L. Weatherford

Registration No. 45,602

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